

5905 LAKE EARL DR.

CRESCENT CITY, CA 95531

IN PRO SE

FILED

08 MAY 27 PM 2:32

IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF CALIFORNIA

RICHARD W. WIEKING  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

HAROLD SHAMBURGER,

PLAINTIFF,

v.

R. KIRKLAND, ET. AL.,

DEFENDANTS.

NO. 007-4597 JSW(PR)

MOTION TO COMPEL DISCOVERY W/  
SANCTIONS.

MOTION FOR AN ORDER TO COMPEL DISCOVERY PER RULE 37(A)  
FED. R. CIV. P.. ON APRIL 11 2008 DEFENDANT'S ATTORNEY RECEIVED  
PLAINTIFF'S FIRST SET OF REQUESTS FOR PRODUCTION OF DOCUMENTS  
PER CERTIFIED MAIL. SEE PLAINTIFF'S ATTACHED EXHIBIT A. PLAINTIFF  
ALSO MOVE FOR AN ORDER PURSUANT TO RULE 37(A)(4) REQUIRING  
THE AFORESAID DEFENDANTS TO PAY PLAINTIFF THE SUM 500.00  
AS REASONABLE EXPENSE IN OBTAINING THIS ORDER; ON THE  
GROUNDS THAT THIS DEFENDANT'S REFUSAL TO ANSWER (PRODUCE  
THE DOCUMENTS) HAD NO SUBSTANTIAL JUSTIFICATION.

DATED 5/18/08

181 Shamburger  
HAROLD SHAMBURGER

**SENDER:**

Complete items 1 and/or 2 for additional services.  
 • Complete items 3, and 4 & b.  
 • Print your name and address on the reverse of this form so that we can return this card to you.  
 • Attach this form to the front of the mailpiece, or on the back if space does not permit.  
 • Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.

## 3. Article Addressed to:

ATTORNEY GENERAL OF CALIF.  
 455 Golden Gate Ave Ste 1100  
 SAN FRANCISCO, CA 94102

*Attalaon Jones*

5. Signature (Addressee)  
*Attalaon Jones*

6. Signature (Agent)  
*✓ inied*

I also wish to receive the following services (for an extra fee):

1.  Addressee's Address
2.  Restricted Delivery

Consult postmaster for fee.

4a. Article Number

7005-1820-0007. 86025888

4b. Service Type

Registered    Insured  
 Certified    COD  
 Express Mail    Return Receipt for Merchandise

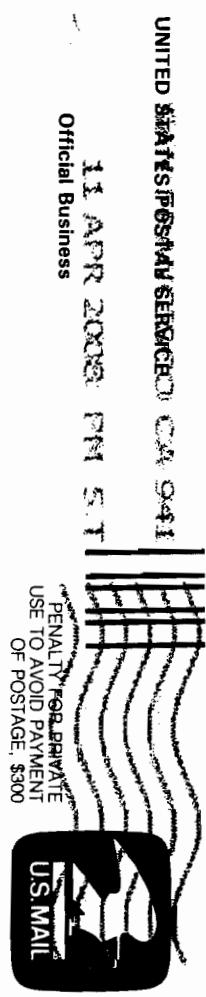
7. Date of Delivery

04-06-08

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 \*U.S. GPO: 1883-352-714 **DOMESTIC RETURN RECEIPT**

*EXHIBIT A*



Print your name, address and ZIP Code here

•  
Seth Buege D16530 D2-211

5905 Lake East Dr  
Crescent City, CA 95532

EXHIBIT A